



**SHOUT-IT-NOW.org**

# Using High Tech Innovations in Low Tech Settings

## 30-Nov-2015

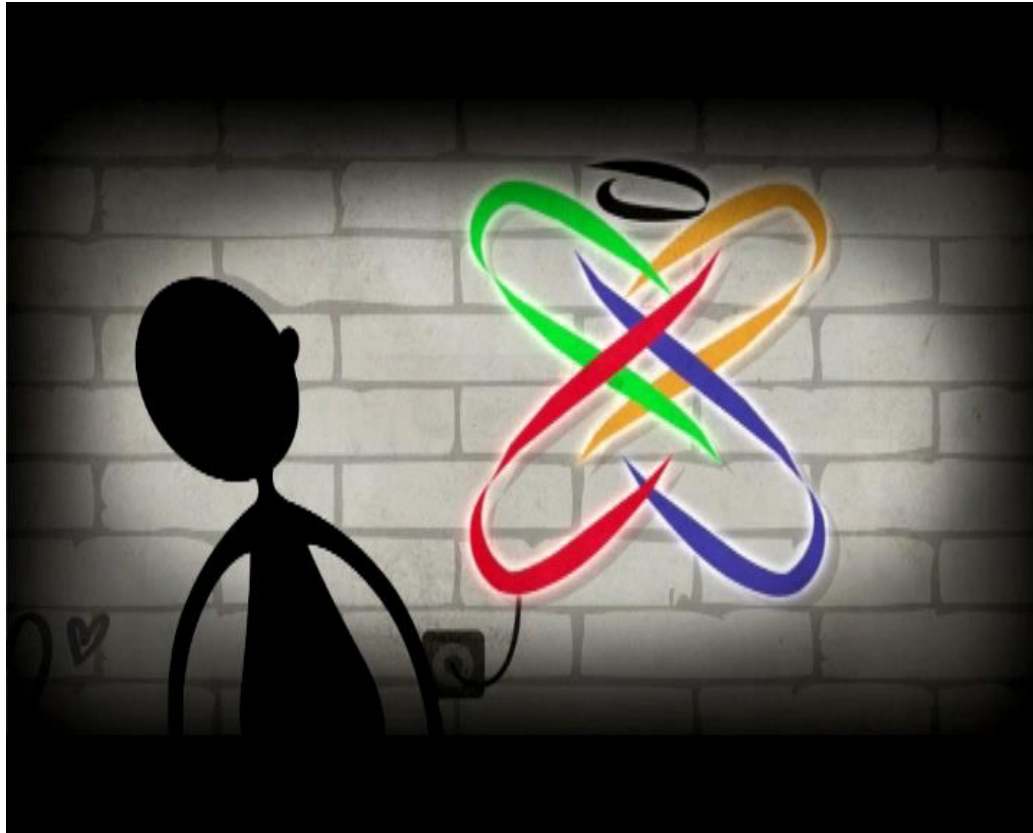
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# Agenda

- Shout-it-Now In Action: Brief Video
- Shout-it-Now: Who we are & what we do
- Why use Technology
- Technology we use:
  - Simulation Software (logistics and operations planning)
  - Biometrics (client security/tracking/service efficiencies)
  - Interactive On-Line Video (client risk assessment and education)
  - Call Center (centralized links to care programme)
- Q & A



# Shout-it-Now Virtual Tour



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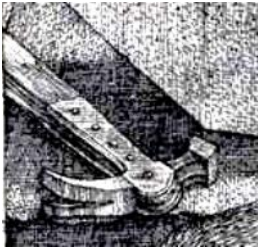

# Shout-it-Now Background

- Founded in 2007 by South African social scientists and USA technology & marketing executives.
- Built a technology rich mobile HCT service that is highly engaging, efficient and scalable (capacity to test 1M/year)
  - Have served Schools, Prisons & General Population in high risk areas
  - PEPFAR awardee: Gauteng, North West, Limpopo & Western Cape
  - Modular add-on services: PHS, TB, MMC Mobilization, SGBV screening
- Key Results:
  - 413,000 people educated & tested to date (each team tests 43K/year)
  - >10% HIV prevalence with 90% LTC via Call Centre in ~45d
  - Rich longitudinal database from biometric and on-line tracking



# So Why use Technology?

- Technology is just a tool.

16 <sup>th</sup> Century	21st century
	

- What matters is how you use it!

Efficient, Engaging High Quality Services



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# Technology is Mutually Beneficial

Technical Element	Organizational Benefit	Client Benefit
Biometrics	Accurate and secure	Faster, safer service
Video Edutainment	Time efficient	More engaging
Online Risk Assessment	Honest answers	Less invasive
Integrated Data Collection	More accurate, eases reporting	Faster, safer service
HIV Rapid Testing QA	Reliably safer service	Safer service
Call Centre Linkage to Care	More efficient	More effective

# Why Simulation Software for Planning

- Easier and cheaper to test and refine ideas in the digital world than in the field
- Resource planning reduces costs AND improves the client experience
- Our Services are complex
  - ❖ Excel spreadsheets became a nightmare & can't do the tasks
  - ❖ Initially 12 different steps & functions with variable times, skills, and equipment



# S-N Process Challenges

- Recruiting
- Registration
- Computer Lab
- Pre-Counseling
- Test Reader
- Post Counseling: HIV- & HIV+
- Confirmatory HIV Test
- CD4 Test
- Call Center – Original Call
- Call Center – Follow-up Calls





# SIMUL8 Analysis

[Insert 30 second AVI of How it works]



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# Biometrics

- Fast, scalable and inexpensive
- Improves customer experience by providing secure, personalized service
- Improves confidentiality
- Eliminates people “gaming” the system



# Biometrics Demonstration



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# Video Edutainment & Integrated Risk Assessment



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# MMC Mobilization Video

## *A Man Talking to his Penis*



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# On-line Videos – Embedded Questions

- Confidential – Reduces embarrassment about talking about risky sexual behavior
- Multiple language support
- Questions can be automatically read
- GREAT consistent data for analyzing behavior and assessing risk



# Call Centre for Links to Care

- HIV+ clients are stabilized onsite and enrolled in LTC programme
- Centralized Call Centre provides ongoing telephonic support
- Personalized Service – Builds trust & Improves Outcomes (90% of clients linked in ~ 45 days)
- Software monitors:
  - Field history
  - Call History & outcomes
  - Prioritization

*“Every call in the field & call center is recorded and audited for quality & Training Purposes ”*



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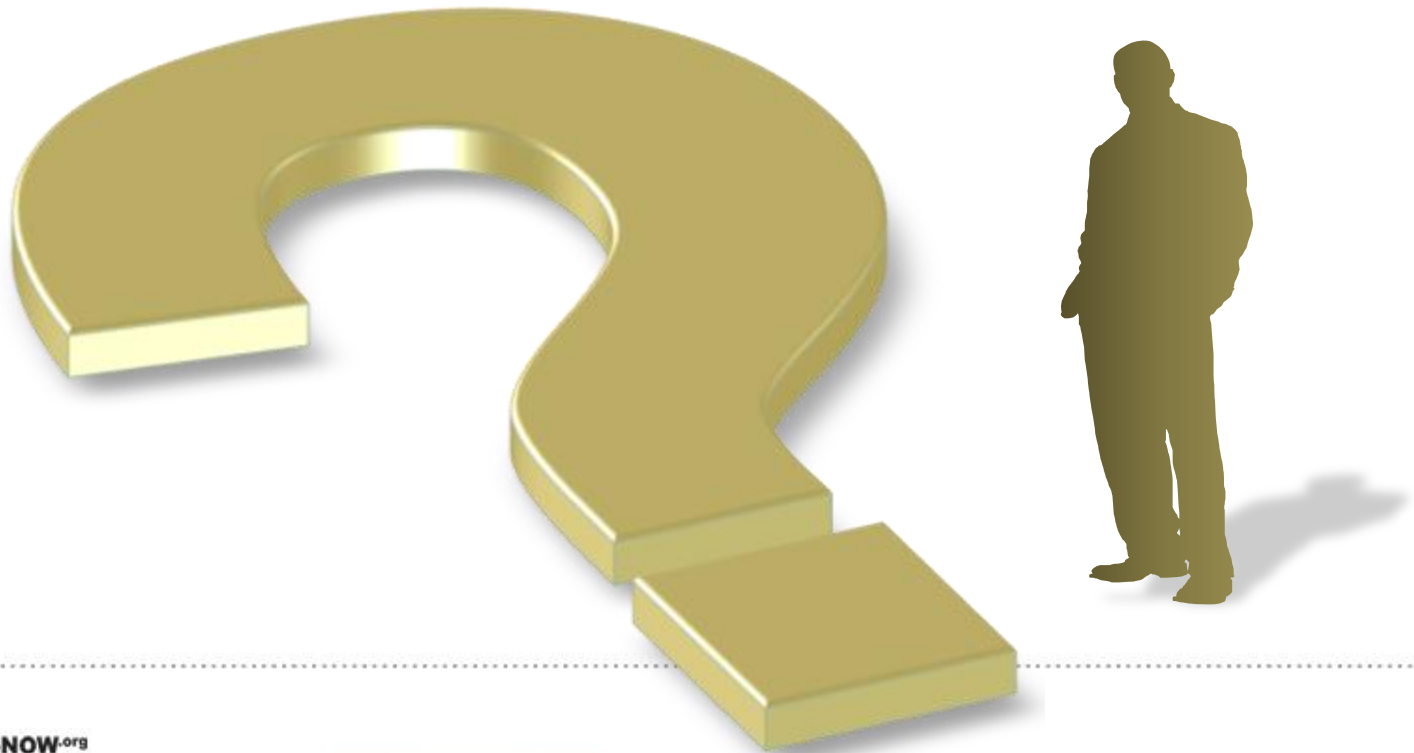
# Conclusion

- Its not about the technology it is about improving efficiency, effectiveness and the client's experience
- Technology isn't the key – your staff is
- Technology provides scalability & consistency
- Data informs decisions and program improvement
- You need to change the culture in your organization to embrace technology – Change Mgmt. is Key





# Questions & Answer Session



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